

## FORM 1: RTCR Sample Siting Plan Form Instructions For Public Water Systems with One Routine Sample Location

### Who should use this form?

Pennsylvania public water systems required to sample **only one time per month and that have identified only one sample location** can use this form to meet the Revised Total Coliform Rule (RTCRC) sample siting plan requirements.

Systems may submit this information in another format, as long as all of the required elements are included.

If you have identified more than one routine sample location or are required to sample more than once a month, use *Form 2: BSDWxxxx, RTCR Sample Siting Plan for Public Water Systems Identifying 2 to 20 Routine Sample Locations*. Also, if your population fluctuates significantly enough to change the required number of routine samples, please use Form 2. Systems identifying **more than 20 routine sample locations** should use Form 3.

### Part 1: General System Information

- **Date Updated:** Above the Part 1 heading, insert the date that the sample siting plan was last updated.
- **Water System Name:** Name of the public water system (PWS).
- **PWS ID:** The seven-digit PWS identification number assigned by DEP.
- **Mailing Address:** Mailing address of the public water system.
- **Contact Person:** Name of the person who is the point of contact for the public water system.
- **Phone #:** Phone number of the public water system contact person.
- **E-mail:** E-mail address for the public water system contact person.
- **System Type:** Check the appropriate system type.
  - **CWS (community water system):** A PWS that supplies water to the same residential population year-round.
  - **NTNCWS (Non-Transient Noncommunity Water System):** A water system that is not a community system that regularly serves at least 25 of the same persons over 6 months per year (e.g., schools, factories and hospitals).
  - **TNCWS (Transient Noncommunity Water System):** A noncommunity water system that does not regularly serve the same persons over 6 months per year (e.g., restaurants, rest stops and campgrounds).
- **Seasonal System:** Check "Yes" if your noncommunity water system does not operate as a public water system on a year-round basis and starts up and shuts down at the beginning and end of each operating season.
- **Population Served:** Enter the population served.
- **Source Types:** Indicate the type of source water used by your PWS (check all that apply).
- **Selling finished water to any other public water system?** Check "Yes" if you sell finished water to any other public water system.
- **Disinfection Treatment Used:** Check the box for each type of disinfection used (check all that apply).
- **Distribution map or plumbing diagram reviewed in developing sample siting plan?** For single service connection systems, a plumbing diagram can assist in determining representative sampling locations. For multiple service connections, the system distribution map should be used in determining representative sample locations.
- **Name(s) of Individual(s) or Company Collecting the Samples:** The name(s) of the individual(s) from either the water system or the laboratory who collects coliform samples.

## Part 2: Sampling Information

*Important Note: Chlorine residual measurements for compliance monitoring must be conducted at the same times and locations as routine and check coliform samples.*

### A. Sample Location Information Table:

- **Sample Type:** This column has been completed by default. Please note that the routine distribution sample must be identified in the first row and the check samples in rows 2 and 3.
  - Please note that routine distribution (D) compliance samples must be collected monthly.
  - Note that for each distribution sample (in addition to the original tap being considered a check sample location) there must be two additional check sample locations: one at a tap within five service connections upstream of the original coliform-positive sample and one at a tap within five service connections downstream of the original sampling site.
  - For multiple service connections, each check sample can be listed in a range of applicable taps within five service connections of the original coliform-positive sample. Example: 304 to 308 Main Street.
- **Location ID:** A 3-digit identification number for the sample site. If you are using a Stage 2 DBP site for coliform sampling, use the same 3-digit number. If you are not using a Stage 2 DBP site, choose a unique number from 700 to 999 for each routine coliform sampling location. Use the same routine Location ID number for associated check sample locations.
- **Site location (address and tap location):** The site location name and address, plus a description of the tap location (Example: XYZ restaurant at 303 Main Street; kitchen sink tap.)
- **Is site accessibility limited?** Check the box if there are any difficulties with obtaining samples from the site (e.g., closed on weekends/evenings). If site accessibility is limited, fill out Part 2.B.

### B. Description of Limited Sample Access:

- Describe the plan for collecting samples at limited accessibility sites.

### C. Description of Representative Sampling:

- Describe how the routine (D) sample location is representative of water throughout your system.

## Part 3: Groundwater Rule Source Water Monitoring

- Check "yes" if the system has not installed 4-log treatment of viruses for one or more groundwater sources.
- If you checked yes, complete the table with the source water ID(s) and a description of raw water sample tap locations. Note: the raw water tap is a sampling tap **prior to** any treatment.